	Δft	After Final					
AMENDMENT TRANSMITTAL LETTER					Re	Rejection	
Application		Filing Date		Examine		Group Art Unit	
08/999,75	,2	June 4, 199	<del>3</del> 7	S. T. Tra		1615	
Applicant(s): Fior	าa Catherine M	lillar				ocket No. IHC 3.0-200	
Invention: MEDIC	INAL AEROSC	OLS AND METH	ODS OF DEL	_IVERY THERE	•	2	
TO THE COMMISSIONER FOR PATENTS  Transmitted herewith is an amendment in the above-identified application.							
The fee has been	ı calculated and						
CLAIMS AS AMENDED							
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	20	- 28 =	0	x 52.00		0.00	
Independent Claims	4	- 4 =	0	x 220.00		0.00	
Multiple Dependent Claims (check if applicable)						-	
Other fee (please specify):  TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:  0.00							
x Large Entity	x Large Entity Small Entity						
x No additional fee is required for this amendment.							
Please charge Deposit Account No in the amount  A duplicate copy of this sheet is enclosed.							
A check in the	he amount of \$		to cover	the filing fee is e	enclosed.		
The Commissioner is hereby authorized to charge and credit Deposit Account No12-1095 as described below. A duplicate copy of this sheet is enclosed.							
x Credit any overpayment.							
x Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.							
Electronic Signature: /Aaron S. Eckenthal/ Aaron S. Eckenthal Attorney Reg. No. 58,891							
LERNER, DAV 600 South Aver Westfield, New (908) 518-6346	nue West Jersey 07090	rg, Krumholz	∴& MENTLIK	, LLP 			
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).							
Dated: April 14, 2009	Dated: April 14, 2009 Electronic Signature for Aaron S. Eckenthal: /Aaron S. Eckenthal/						